PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10783237

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
┟╤	OTAL CLAIMS			(Column 1)		(Column 2)		TYPE		OR	SMALL	
TOTAL CLANIVIS			22					RATE	FEE]	RATE	FEE
F	OR 	<u> </u>	NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
Τ(OTAL CHARGE	ABLE CLAIMS	22 mi	nus 20=	• 2			XS 9=		OR	X\$18=	36
II—	DEPENDENT C			inus 3 =				X43=	·	OR	X86=	86
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* 1	the difference	e in column 1 is	less than z	ero, enter	"0" in c	column 2	ı	TOTAL	1	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
_		(Column 1)	<u>.</u>	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	<u>i</u>		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
1	171219							+145= TOTAL		1	TOTAL	
(Column 1) (Column 2). (Column 3)								DDIT. FEE	L	OR	ADDIT. FEE	
		CLAIMS		HIGHE		(Column 3)			LADDI	1 1		4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	sirsk		= '		X\$ 9=		OR	X\$18=	•
	Independent	*	Minus	***		=		X43=	·	OR	X86=	_
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=				
										OR	+290=	
								TOTAL DDIT. FEE	·	OR ,	TOTAL ODIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X43=		.	X86=	
9	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A43-		OR	∧00=	
• 14	the entry in colum	Ŀ	+145=		OR	+290=	·					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OF											TOTAL DDIT. FEE	
T	he *Highest Num	ber Previously Paid	For (Total or I	Independent	t) is the h	ighest number	found	I in the app	ropriate box	in colu	mn 1.	[